

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000001647

Entity Name: NORTON FOLGATE, INC.

FILED  
Jan 19, 2005  
Secretary of State

## Current Principal Place of Business:

8841 W TERRY ST  
BONITA SPRINGS, FL 34135

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 1240  
BONITA SPRINGS, FL 34133

## New Mailing Address:

FEI Number: 59-3690170

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BARTLETT, SIMON  
PO BOX 1240  
BONITA SPRINGS, FL 34133 US

## Name and Address of New Registered Agent:

BARTLETT, SIMON  
8841 W TERRY ST  
BONITA SPRINGS, FL 34135 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: SIMON BARTLETT

01/19/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VPS ( ) Delete  
Name: ADKINS, TERRY  
Address: 5192 WEST BLVD  
City-St-Zip: NAPLES, FL 34103

Title: VP ( ) Delete  
Name: PITHER, ALAN  
Address: SUMMERWINDS 6 PRIESTS PADDOCK  
City-St-Zip: BEACONSVILLE, BUCKINGHAMSHIRE, HP9 1YL UK

Title: P ( ) Delete  
Name: BARTLETT, SIMON  
Address: 8617 RIVER HOMES LANE #304  
City-St-Zip: BONITA SPRINGS, FL 34135

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: CLAYBAR, TOM  
Address: PO BOX 111717  
City-St-Zip: NAPLES, FL 34108

Title: VP (X) Change ( ) Addition  
Name: PITHER, ALAN  
Address: SUMMERWINDS 6 PRIESTS PADDOCK  
City-St-Zip: BEACONSVILLE, BUCKINGHAMSHIRE, FL HP9 1YL UK

Title: P (X) Change ( ) Addition  
Name: BARTLETT, SIMON  
Address: 8841 W TERRY ST  
City-St-Zip: BONITA SPRINGS, FL 34135

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIMON BARTLETT

P

01/19/2005

Electronic Signature of Signing Officer or Director

Date